Female sex workers (FSWs) are often conceptualized as a homogenous group. Yet, addressing their vulnerability to HIV appropriately requires understanding their cultural, ethnic, and economic diversity. Haitian FSWs exist within a context of political impunity, because of their lack of citizenship and the liminal criminality of sex work. The prevalence of HIV among FSWs in the DR is estimated at 5.4% (ECVC, 2015).

The purpose of the present study was to explore HIV vulnerability as a result of political impunity and to describe the social resources that may support them. The approach that focuses on social cohesion and solidarity. The purpose of the present study was to explore HIV vulnerability as a result of political impunity and to describe the social resources that may support them.

Results

Participants were financially independent, and many were responsible for supporting romantic partners financially, through their earnings from sex work.

For many women, being a caregiver was a source of pride. They also suffered in this role as they struggled to meet their children’s basic needs. They worried about their own health and safety and what would become of their children if they could not support them.

Limited social connections. Participants’ social ties—primarily to other poor women and neighbors—were weak. They were emotionally and geographically distant from family members and relied on childcare assistance from neighbors during working hours.

Navigating sex work. Participants developed such strategies as demanding payment up front, avoiding alcohol and drugs while working, selecting specific types of clients, and traveling in groups to avoid being robbed, sexually assaulted, or harassed by clients and police.

Gossip and sex work stigma. Stigma associated with sex work increased FSWs’ vulnerability to adverse situations involving romantic partners, friends, and the wider community. Although sex work was generally accepted as a livelihood strategy, community gossip was common, often disrupting romantic partnerships, which were already difficult to maintain. In this way, sex work functioned as a “public secret” within participants’ communities.

Internal stigma. Younger participants who had clear plans for the future that did not involve sex work were less willing than others to allow their identities to be defined by sex work. Other participants did identify themselves in terms of sex work, because of the critical role it played in their livelihood and their ability to care for their children.

Condom use and HIV knowledge. Most participants reported using condoms with clients, but few used condoms with romantic partners. Those aware of their HIV-positive status faced emotional, economic, and geographical challenges to accessing care. Knowledge specifically about HIV treatment was often limited and infused with misinformation about proper medication use.

Discussion and Conclusion

Political impunity and HIV vulnerability among Haitian female sex workers in the Dominican Republic

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